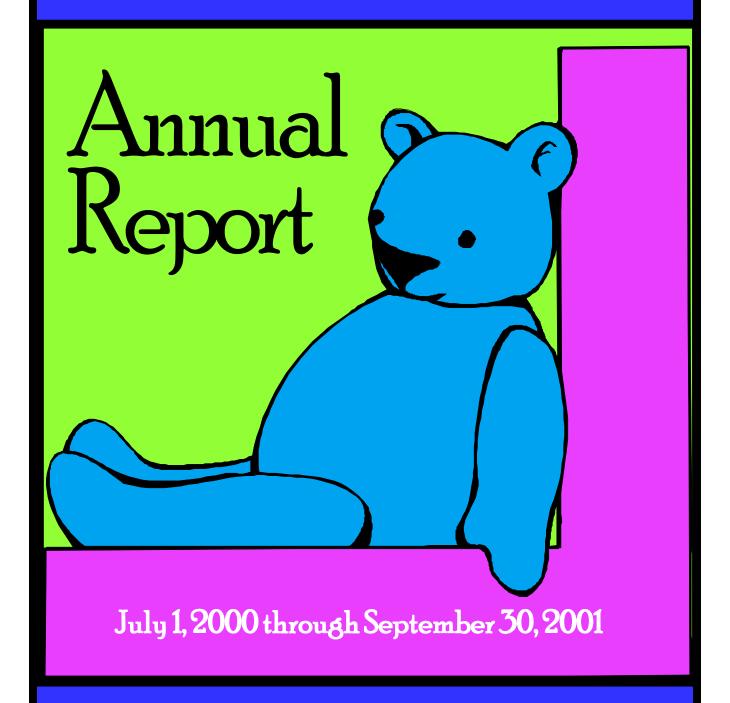
# Alaska Early Intervention/ Infant Learning Program



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### Letter from Alaska's ICC Chair



TONY KNOWLES, GOVERNOR

#### GOVERNOR'S COUNCIL ON DISABILITIES AND SPECIAL EDUCATION

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#### Dear Reader:

As the Chair of the Interagency Coordinating Council (ICC), I invite you to read this informative report and explore Alaska's efforts to improve the lives of infants and toddlers with special needs and their families.

The ICC is composed of people who care about the services and supports available to the children and their families through early intervention. The parents on the ICC bring their real live experience to the table and those who provide the services provide expertise on how systems work and how to accomplish the tasks of the ICC. Working together as a team makes the ICC as asset in the planning and advocacy for a comprehensive and coordinated system of services and supports.

Every year, Alaska's ICC has quarterly meetings in rural and urban areas around the state. These provide important opportunities for ICC members to meet with many families all over Alaska and develop a better understanding of gaps in services and supports.

Interagency Coordinating Council Certification of Annual Report
On behalf of the State Interagency Coordinating Council of Alaska, I certify that the
ICC agrees with the information presented in the State's Annual Performance Report
for federal fiscal year 2000 (July 1, 2000 through September 30, 2001). The ICC
understands that Section 80.40 of the Education Department General Administrative
Report containing information about activities and accomplishments of the fifteenmonth grant period, as well as how funds were spent. The Council has reviewed the
Report for completeness of its contents and accuracy.

We submit this Report in fulfillment of our obligation under Section 641(e) of the Individuals with Disabilities Education Act (IDEA) to submit an annual report to the Secretary and to the Governor on the status of the State's early intervention program for infants and toddlers with disabilities and their families.

Nikki Kinne, ICC Chair

Creating Change That Improves The Lives Of People With Disabilities

### Mission Statement

The State of Alaska Department of Health and Social Services is committed to promoting an accessible, flexible array of quality services to all Alaska infants and toddlers with special developmental needs and to their families in a manner that respects families, communities and cultural differences and promotes a genuine partnership in all aspects of service design and delivery.

# Service Principles

The service principles of the Early Intervention/ Infant Learning Program help to ensure that all families have equal access to a coordinated program of comprehensive services that:

- ◆ Foster collaborative partnerships
- ♦ Are family centered
- Occur within the families' homes, communities and other natural settings
- Are built on mutual respect and acceptance of diversity
- Support rather than supplant the natural caregiving roles of families
- Promote family autonomy

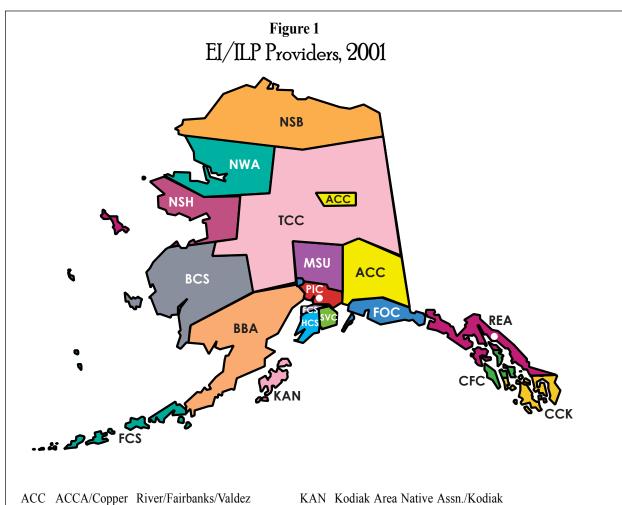
## System Overview

The Alaska Early Intervention/Infant Learning Program (EI/ILP) system is extremely dynamic and diverse.

- ◆ Referrals are received daily through the 19 EI/ILP agencies in the state. Referrals received at the state office are forwarded immediately to the appropriate regional agency.
- ◆ Programs evaluate children for eligibility; teams develop outcomes, services and supports for eligible children and their families.
- ◆ Children and their families receive services and supports in their homes or other natural environments of their choice during their enrollment.
- ◆ Children exit the EI/ILP system throughout the year, moving into school district special education programs, Head Start or other community programs when they reach the age of three or when they no longer need early intervention services.

### The Service Provider Locations

Currently the EI/ILP providers include seventeen funded agencies located regionally around the state. In addition, two statewide consultant programs provide itinerant support services for providers and families of infants and toddlers experiencing hearing and/or vision impairments.



BBA Bristol Bay Area Health Corp./ Dillingham

BCS Bethel Community Services/Bethel

CCK Community Connections/Ketchikan

CFC Center for Community/Sitka

FCS Frontier Community Services/Soldotna/ Aleutian/Pribilofs

FOC FOCUS, Inc./Chugiak/Cordova

HCS Homer Childrens' Services/Homer

MSU Mat-Su Services for Children & Adults, Inc./Wasilla

NSB North Slope Borough/Barrow

NSH Norton Sound Health Corp./Nome

NWA Northwest Arctic School District/Kotzebue

PIC Programs for Infants & Children/Anchorage/Whittier

REA REACH/Juneau/Haines/Petersburg

SVC SeaView Community Services/Seward

TCC Tanana Chiefs Conference/Fairbanks (Interior)

Note: Statewide consultant programs for vision and hearing are based in Anchorage.

# Analysis of the child find system referrals

### How many referrals are received each year?

Each regional EI/ILP agency receives referrals directly from parents and service providers. Between July 2000 and June 2001, two-thousand-thirty-two (2032) referrals were entered in the EI/ILP database records. This was a 5% increase over the 1927 referrals reported in the previous 12 months.

### Where are they from?

Referrals from more than 137 cities and villages and four (4) military bases were reported from July 2000 through June 2001. Many of the villages are accessible only by air most of the year, and this poses a major challenge to providers attempting to provide timely follow-up. Part C funds from FY 1999 were used in a focused effort to do outreach to remote communities over the past two years. Table 1 shows the frequency of referrals for the 17 regional EI/ILP agencies compared over the past two state fiscal years.

Table 1. Number of referrals each year by region: 7/99-6/00 to 7/00-6/01.

EI/ILP REGION	FY00 REFERRALS	FY01 REFERRALS
ACC	267	273
BBA	29	41
BCS	95	101
CCK	44	27
CFC	72	46
FCS	133	125
FOC	81	75
HCS	80	42
KAN	56	33
MSU	108	141
NSB	42	66
NSH	61	55
NWA	96	131
PIC	490	566
REA	136	128
SVC	79	42
TCC	58	140
TOTAL	1927	2032

### Who are the primary referral sources?

Table 2. Number and Percent of Referrals by Referral Sources, July 2000-June 2001.

Referral Source	Number of Referrals	Percent of Total Referrals
Health Care		
Provider	797	39%
Parent	627	31%
Early Childhood		
Providers	201	10%
DFYS and DMHD	D 149	7%
Other	143	7%
Friend/Family		
Member	115	6%
TOTAL	2032	100%

# How did parents who self-referred hear about the EI/ILP services?

Table 3. How parents heard about EI/ILP services, July 2000-June 2001.

Parents' Information	Percent of
Source	Parent Referrals
Child Find publicity	46%
Health Care provider	22%
Other	18%
Early childhood prograr	n 7%
Friend/family member	7%
TOTAL	100%

### At what age are children referred?

Table 4. Age of children at referral, July 2000-June 2001.

Age at	Number	Percent of
referral	of children	total
Birth-<12 months(1st year)	926	46%
12-<24 months(2 <sup>nd</sup> year)	543	27%
24-<36 months(3 <sup>rd</sup> year)	563	28%
TOTAL	2032	*100%

<sup>\*</sup>Note: Percentages are rounded to nearest whole number.

### How many referrals are boys versus girls?

56% boys (1,141) 44% girls (891)

Alaska live births (Most recent statistics, 1999)

52% boys (5,160) 48% girls (4,799)

# How many of the children referred are found eligible for enrollment?

Of the 2032 children referred from July 2000-June 2001, 242 could not be evaluated or assessed either because their parents declined the evaluation (118) or because the program could not locate the family (124). Often this was because someone other than the family referred the child and families without telephones had to be contacted in person after the preliminary referral was received. Of the 913 children who were evaluated/assessed, 63% were found to be eligible for enrollment.

# How is eligibility for EL/ILP defined in Alaska?

Alaska has chosen to define eligibility for Part C by a fifty percent or greater developmental delay in one or more domains of development, by clinical opinion that such a delay exists or by a diagnosed condition deemed likely to result in such a delay. The state EI/ILP regulations allow the enrollment of children with lesser delays or risk factors to be enrolled with limited services, as funding permits.

# Why are children eligible for the EI/ILP system?

Of the 576 children who were found eligible and enrolled in EI/ILP services from July 2000 through June 2001, 486 (85%) showed developmental delays and 43 (7%) were enrolled due to a diagnosed condition with a high probability of resulting in developmental delays. Thirty-three (6%) were enrolled due to multiple biological and environmental risk factors. The remaining 14 (2%) did not have evaluation information documented in the database at the time of enrollment.

# Of the children who showed developmental delays:

56% tested 50% or more below age level in one or more areas of development.

23% tested 15-49% below age level in one or more areas of development.

21% could not be tested, but had significant developmental delays according to informed clinical opinion.

# What diagnosed conditions are most likely to require early intervention Part C eligible children in Alaska?

Of the 232 enrolled children who had Part C eligible diagnoses, the top conditions were:

Significant/progressive vision impairment	51
Down Syndrome	27
Significant/progressive hearing impairment	21
Complex seizure disorder	18
Cerebral palsy	17
Hydrocephaly	14
Congenital heart disease	13
Fetal Alcohol Syndrome (FAS)	10
Bronchopulmonary dysplasia (BPD)	10

# What does the EI/ILP system offer for children who are referred but not eligible for services under the state Part C eligibility definition?

All families referred to the system who are not enrolled in services are offered periodic re-screening of their child's developmental progress and receive a developmental status report and suggested home activities to enhance their child's development.

An increasing number of regional EI/ILP programs are offering enrollment in a developmental monitoring program using the Ages and Stages Questionnaire (ASQ). These programs distribute the ASQ to the families of infants and toddlers in their communities and score those that are returned. If it appears that a child's development is increasingly delayed, the family is offered another evaluation. If the child's development appears to be on track, the program sends the family a developmental status report and suggested activities that are adapted to the cultural background of the family. Regional programs currently providing this follow-up program are based in Kodiak, Seward, Fairbanks and Wasilla.

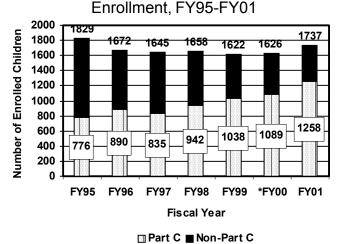
# Status of the EI/ILP System of Services

### How many children receive services over the course of the year?

During state fiscal year 2001, the Alaska EI/ILP system, through its 19 programs, provided services to 1737 eligible children and their families. Seventy three (73%) percent of these children were Part C eligible. The following figure clearly indicates that Alaska has experienced a trend of identifying and serving an increasing number of Part C eligible children since beginning implementation of Part C service in the fall of 1994 (FY95).

Figure 2

Early Intervention/Infant Learning Program
(EI/ILP) Part C Enrollment Compared to Total



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### What does a point in time "snap shot" of the children receiving services look like?

Because the system is so dynamic, it helps to have a point in time comparison from year to year. Alaska reported to the Federal Office of Special Education Programs (OSEP) on Part C eligible children receiving services on December 1, 2000. The data show the following.

Table 5. Ages of Part C eligible children enrolled as of 12/1/2000.

Age on 12/1/2000	Number	Percent of Total
Birth to <12 months	102	16%
12 to <24 months	183	28%
24 to <36 months	324	50%
36 months or older	42	6%
TOTAL	651	100%

Table 6. Race/Ethnicity of Part C eligible children enrolled as of 12/1/2000.

Race/Ethnicity	Number	Percent of Total
White(Not Hispanic)	302	47%
Native American	260	40%
Asian	35	5%
Black/African American	28	4%
Hispanic	26	4%
TOTAL	651	100%

\*Note: 97 children whose ethnicity was reported as "other" or "unknown" were included in the above categories according to the allocation method prescribed by OSEP for the national child count data report.

**Table 7. Early Intervention Service Settings, December 1, 2000.** 

Setting	Number of Children	Percent of Total
Home (includes		
foster home)	596	92%
Service provider office	21	3%
Program designed for		
typically developing childre	en 20	3%
Other setting	13	2%
TOTAL	651	100%

# How many and what types of personnel provide early intervention services?

Of the more than 140 personnel and contractors who provide early intervention services to children enrolled in the Alaska EI/ILP system, only 54 are employed full-time. The remaining personnel are employed part-time or contracted by the day or hour to provide early intervention services. The most common provider types and the approximate full-time equivalents (FTE) for each provider type statewide are shown in Table 8.

Table 8. Early Intervention Providers Serving Children Enrolled on December 1, 2000.

Provider Type	FTE
Special educator	15.1
Early childhood educator/child	
development specialist	10.8
Occupational therapist	11.5
Speech/Language pathologist	18.3
Physical therapist	14.7
Paraprofessional/early	
intervention assistant	17.8
Social worker	3.6
Nurse	2.2
TOTAL	94.0

# When and why do children leave the EI/ILP system?

Of the 505 Part C eligible children who exited the system from July 2000-June 2001, the reasons were as follows:

Table 9. Exit reasons reported for Part C children leaving EI/ILP from July 2000-June 2001.

Exit Reason	Number of	Percent
	children	of total
Reached third birthday	328	65%
Moved out of state	52	10%
Parent withdrew child	50	10%
Unable to locate	40	8%
No further service needed	32	6%
Deceased	3	1%
TOTAL	505	100%

Of the Part C eligible children who exited at age three, 70% were determined eligible for Part B special education services and went on to receive services from their local school district. Twenty-one percent (21%) were not eligible for Part B. Their parents chose to enroll them in other community programs, such as Head Start, where available, or chose to keep them at home until kindergarten. Nine percent (9%) of the children turning three exited the EI/ILP system without a determination of Part B eligibility. In the coming year, efforts will be focused on reducing the number of children exiting without Part B eligibility determination. This will be done through monitoring, training for interagency transition teams and collaborative technical assistance.

## Sources of Funding and Other Support for EI Services

One of the goals of the service system is to access all dollars available for early intervention services. State general funds (64%) and Part C funds (23%) were supplemented by funds received from third party payers and families (13%) as shown in Table 10.

Table 10. EI/ILP Service Coordination and Direct Service Funding Sources.

State Fiscal Year 2001 (July 1, 2000 - June 30, 2001)

Funding Sources			
Source	Level of Funding	Type of Action	
Part C	\$1,700,300	El Services	
State General Fund	\$4,725,006	El Services	
Program Receipts from Billing (a)	\$ 926,473	Therapies	
Total	\$7,351,779		

(a) All receipts go directly to El/ILP programs

Since 1994, Alaska has developed and implemented a fee-for-service billing system in regional EI/ILP agencies. Currently the only EI services that can be billed to third parties by EI/ILP agencies under state Public Health regulations are occupational, physical and speech/language therapy.

Medicaid continues to be Alaska's primary third party payer. Denali KidCare, Alaska's Child Health Insurance Program, began enrolling clients on March 1, 1999. This program extends Medicaid eligibility to uninsured children with family incomes up to 200% above poverty. Children with insurance and family incomes up to 150% of the poverty level are also eligible. The EI/ILP staff assists families with the application process, and the

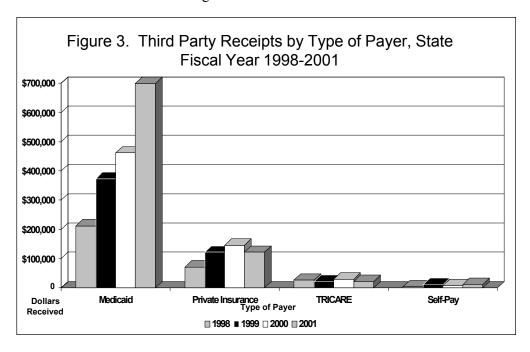
Table 11. Third Party Payer Receipts, July 2000-June 2001.

Payment Source	Percentage	Amount
Medicaid (including CHIP	76%	\$699,515
Private Insurance	19%	\$121,947
TRICARE (CHAMPUS)	4%	\$ 21,495
Families	1%	\$ 10,632
Total	100%	\$926,473

number of insured children has increased significantly under this program.

Families not eligible for Medicaid were billed for therapy services on a sliding fee scale.

Alaska's Part C program, housed in a public health agency, falls under state regulations which ensure that no eligible child will be turned away due to his or her family's inability to pay. Families who receive a reduced bill based on the sliding fee scale may elect to waive to a lesser amount, even \$0, if they feel they are unable to pay. Families paid a total of \$10,755 for therapy services from July 2000 through June 2001. Figure 3 shows the program receipts from third party payors over the past four years. These funds have been used to increase the availability of services for Part C eligible children.



### How Part C funds were used

Table 12 summarizes the use of Part C funds allocated to Alaska from July 2000 through June 2001.

Table 12. Summary of Part C Funds Used, July 2000-June 2001.

TOTAL	\$2,220,650	
Agencies		El services
Regional/Community	\$1,700,300	Direct
		Planning Dev.
ICC	\$ 113,000	Admin.
		Planning Dev.
Part C Lead Agency	\$ 407,350	Admin.

Three lead agency positions, including the Part C Coordinator (1 FTE), Early Intervention Specialist (1 FTE), and Data Analyst/Programmer (1 FTE) were paid for with Part C funds within the lead agency. Travel and planning and development project costs were also covered in part by Part C funds. Special projects included five innovative projects to develop and demonstrate community collaboration to promote continuity of services for children, birth to 5 years; ongoing database system development and training, a statewide autism alliance for young children, and personnel development and training.

The Governor's Council on Disabilities and Special Education (GCDSE) serves as the Interagency Coordinating Council (ICC) and received \$113,000 for one administrative position and various planning, development and training activities, including \$10,000 in stipends for parents and providers to attend a 5-day Autism Institute in Anchorage, June 11-15, 2001.

Approximately 77% (\$1,700,300) of all Part C funds went to community-based agencies for the provision of direct early intervention services to eligible children with disabilities, ages birth to three years, and their families. These funds were used primarily for family service coordination, IFSP team meetings, comprehensive evaluation/assessment activities, special

instruction and other services for Part C children after all other payment sources were exhausted.

# Statewide Supervision and Monitoring of Programs

Community-based teams facilitated by a state contractor review EI/ILP agencies on a four-year cycle, or more often, if needed. Local programs complete self-evaluations in the interim years. Alaska's early intervention program standards are the guide for the monitoring review and identify best practices in addition to regulatory requirements. The state monitoring process for EI/ILP identifies and builds on program strengths rather than merely rectifying non- or partial compliance with program standards. Seven regional programs and one statewide consultant program received monitoring reviews between July 2000 and June 2001.

The monitoring review process is values-based and focuses on gathering information through interviews about the quality of life of children and their families who receive services. Review team members also look at a randomly selected sample of agency files to review compliance with program standards. The community-based review teams conducted an average of 43 interviews with parents, staff of related community agencies, and staff and board members of the agency being reviewed, during each site review.

Related agency staff reported that EI/ILP programs collaborate and contribute to the positive outcomes for clients, follow-up when a referral is made, provide good communication and follow through on plans/agreements for mutual clients.

Many parent and family member quotes were collected from the interviews that illustrate the strengths of the EI/ILP programs. The following sample quotes are grouped to illustrate the positive outcomes of the EI/ILP services.

# 1. Early intervention services, supports and resources enhance outcomes for infants and toddlers and their families.

"Whenever we go to the doctor, she is always there. She helps me understand and explains what the doctor says."

"ILP tailors their services to what I need."

"ILP has totally alleviated the stress and isolation."

"Now that our child's hearing has improved, our child plays with other kids and relates better with our whole family."

# 2. Family-centered practices are embedded in all aspects of early intervention, from initial identification through the child's transition to Part B or other services.

"Within a week of my initial call, someone from ILP came over, visited my home, suggested options and worked around my schedule."

"Staff are very respectful and sensitive to village and Native cultural differences."

"Staff listen...The family is in the lead."

"This whole family concept builds outstanding trust."

"(The staff) always came to our house and involved siblings in everything."

"They are respectful of my schedule and come after 5:30 p.m."

"The extra work \_\_\_\_ put into my child's transition into preschool was great, way over and above the call of duty."

# 3. Early intervention services have increased the family's capacity to enhance their child's development.

"She works well with me, my husband and my mother (and) teaches us all to work with my son."

"The playgroups really help in our parent-child relationships."

"They showed me how to work with my son. Now I am more confident."

"Before we used to give (our child) what we thought he wanted, but now we can respond to what he's really asking for."

"We are thriving as a family because of ILP services. Being able to access ILP services has taken a lot of frustration out of our lives"

# Four of the agencies reviewed in FY2001 were spotlighted for excellence in the following areas:

Seaview Community Services in Seward:

- outstanding representation of parents on their agency Board of Directors,
- excellent interaction with other human service agencies in the community, and
- ◆ innovative outreach to new parents in the community via a "Baby Welcome Wagon" and the Ages and Stages Questionnaire

REACH, Inc. in Juneau:

- well-trained and caring staff who have been with the agency for many years, and
- high level of program continuity, quality of services and family satisfaction

Mat-Su Services for Children and Adults in Wasilla/Palmer:

- excellent leadership resulting in a very strong program,
- central role for parents in service plans, and
- encouragement of natural family supports providing a strong safety net for children,

North Slope Borough EI/ILP in Barrow:

- ◆ involvement of EI/ILP Specialist in village activities resulting in an exceptionally high level of trust, and
- ◆ hiring of two village-based teachers to provide enhanced EI/ILP services in their own communities.

# Issues identified during monitoring reviews included the following:

- ♦ High staff turnover resulting in service gaps in rural areas.
- ◆ Limitations in specialized services in rural areas diminish the choices available to families who wish to stay in their home community. Access to specialized services depends largely on the area in which the family lives.

#### Actions taken to resolve issues

At the community level:

◆ Individual programs submit action plans outlining steps they will take to resolve issues identified during state monitoring reviews. The communitybased review team makes recommendations in a written report. An action plan is then developed by the local agency and approved by the state early intervention office. Progress on the action plan is monitored by the state office and is reviewed and updated as part of the agency self-evaluation each year between state monitoring reviews.

#### At the state level:

- ◆ The state provided focused training for providers. Training was provided on-site, at statewide meetings and via teleconferences.
- ◆ A statewide steering committee oversees a joint review process and standards focusing on quality of life outcomes for Early Intervention, Developmental Disabilities and Mental Health programs.
- Advocacy for additional funding to support increased access to services in rural and remote areas of the state continues to be a priority of the lead agency and the Interagency Coordinating Council.

#### Steps to improve monitoring and technical assistance

The early intervention program will continue implementation of the community-based review process with programs statewide.

- ◆ The early intervention program will continue to work with the interagency steering committee to refine the joint review process and outcome measures.
- ◆ The EI/ILP Program Operations manual has been extensively revised and expanded. Training on use of the new manual will take place by teleconference for program staff.

# Families Satisfied with Early Intervention Services (No Disputes Filed)

The State of Alaska has had no complaints or disputes filed with the Early Intervention/Infant Learning Program. Families interviewed during program monitoring reviews consistently report high levels of satisfaction with the services they receive through the EI/Infant Learning Program.

#### Governor's Council on Disabilities and Special Education (State Interagency Coordinating Council)

FY 2001 activities included a

- statewide public awareness committee,
- support for Autism Alliance teleconferences,
- coordination and support for statewide parent training and advocacy efforts, and
- participation in initial planning and coordination of the statewide Continuous Improvement Monitoring Process (CIMP) for Part B and Part C systems.

The Council members have agreed to serve on the statewide Steering Committee for the CIMP Self-Assessment to be completed within the next year.

Council members are called upon to serve on a variety of state level committees and advisory boards. The Early Intervention Program Advisory Committee (EIPAC), Early Intervention Comprehensive System of Personnel Development Committee (EICSPD), State Early Childhood Transition Policy Team, Autism Alliance, Key Campaign, and Special Education Service Agency (SESA) Board of Directors are several of the groups that benefit from representation by Council members.

### Interagency agreements and other collaborative efforts

- ◆ The State Early Childhood Transition Policy Team continues to teleconference quarterly to review transition issues and provide support to the Alaska Transition Training Initiative training team. Members of the policy team also presented training on the Statewide Interagency Agreement to providers at three statewide conferences during the year.
- ◆ Collaborative sponsorship of the second phase of Infant Toddler Behavioral Health Institutes was expanded to include Division of Family and Youth Services, Head Start and Early Childhood Preschool programs in addition to the Division of Mental Health and Developmental Disabilities.

  Approximately 200 providers representing all of these programs in addition to EI/ILP attended a 2-day institute introducing a consultative model for Infant/Toddler Behavioral Health services.
- ◆ Part C staff has collaborated with the newly hired statewide Children's Behavioral Health Coordinator to plan and develop consultative infant/toddler behavioral health supports and services accessible to EI/ILP providers and families.
- ◆ The Alaska Autism Alliance worked with the University of Alaska Anchorage and the Department of Education and Early Development to

- sponsor a 5-day Early Childhood Autism Institute attended by over 150 parents and providers in June 2001.
- Part C staff collaborated in planning and development activities under the state Early Hearing Detection and Intervention Grant.
- ◆ Part C staff, Governor's Council members and staff, and Department of Education and Early Development (EED) staff partnered to plan and convene the initial meeting of the statewide steering committee and cluster teams for the joint selfassessment phase of Alaska's Continuous Improvement Monitoring Process (CIMP)
- Part C staff and Governor's Council members continued planning development and implementation of a statewide public awareness program including mailings to physicians, provider information exchanges, enhanced funding of local and regional child find activities and beginning design of a statewide early intervention web site.
- ▶ Part C staff participated in activities of the EED State Improvement Grant (SIG), and the Recruitment and Retention project of the Governor's Council to develop collaborative strategies to recruit and retain qualified providers, both professional and paraprofessional.

# Governor's Council on Disabilities and Special Education

(Revised 12/19/01)

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Term ends: 6/30/02

Work CMTE

**Education CMTE** 

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**ADDRESS** 

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Parent

Parent

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Family Resource Project (FRP)

Legislative &Budget CMTE

EIC

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State Capitol

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Parent EI Provider

Chair Early Intervention CMTE

Autism Alliance

Greg Maloney

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DOE

Special Education 801 W. 10<sup>th</sup> Suite 200

Juneau, Alaska 99801 Term Ends: 6/30/02

State Special Education Director

**Education CMTE** 

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Stacey Messerschmidt (907) 883-3944 (h)

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Consumer

Parent

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### Alaska Early Intervention/Infant Learning Services

# Directory of Regional & Statewide Contacts

**ANCHORAGE** 

Anchorage School District

Alaska Early Intervention Hearing Resource (AEIHR)

(statewide consultant services)

Attn: Dennis Lee 4600 DeBarr Road Anchorage, AK 99508 Phone: (907)742-4273 Fax: (907)742-4299

E-mail: aeihr@xmail.asd.k12.ak.us

Programs for Infants & Children, Inc. (PIC)

Attn: Carol Barrier

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Anchorage, AK 99503 Phone: (907)561-8060 Fax: (907)563-3172 E-mail: cbarrier@picak.org

info@pikak.org

Special Education Service Agency (SESA)

Vision Impairment Services for Infants & Toddlers (VISIT)

(statewide consultant services)

ATTN: Julie Smith

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**BARROW** 

North Slope Borough Infant Learning Program

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**BETHEL** 

Bethel Community Services Family Infant Toddler Program

Attn: Mary Whitaker

PO Box 2188

Bethel, Alaska 99559 Phone: (907)543-3690 Fax: (907)543-5520

E-mail: mary whitaker@ddc.org

**CHUGIAK** 

Chugiak Family Outreach Center

Understanding Special Needs, Inc. (FOCUS)

Attn: Lizette Stiehr PO Box 671750

Chugiak, Alaska 99567 Phone: (907)688-0282 Fax: (907)688-2013

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**CORDOVA** 

Prince William Sound Infant Learning Program

(FOCUS satellite office) Attn: Bonnie Makinson

PO Box 1608

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**DILLINGHAM** 

Bristol Bay Area Health Corporation (BBAHC)

Infant Learning Program Attn: Linda Hurley

PO Box 130

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#### **FAIRBANKS**

Alaska Center for Children & Adults, Inc. (ACCA),

Project TEACH Attn: Colleen Chinn 1020 Barnette Street Fairbanks, Alaska 99701

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E-mail: acca ilp@mosquitonet.com

#### **COPPER CENTER**

Copper River Basin Infant Learning Program (ACCA/Project TEACH satellite office)

Attn: Sylvia Kennedy

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E-mail: crilp@cvinternet.net

#### **VALDEZ**

Valdez Infant Learning Program (ACCA Project TEACH satellite office)

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#### **FAIRBANKS**

Tanana Chiefs Conference (TCC)

Infant Learning Program Attn: Sarah Kuenzli 122 First Avenue

Fairbanks, Alaska 99701 Phone: (907)452-8251 Fax: (907)459-3952

E-mail: skuenzli@tananachiefs.org

#### **HOMER**

Homer Children's Services

(Birth 2 Three)

Attn: Colleen Powers 3691 Ben Walter Lane #4 Homer, Alaska 99603 Phone: (907)235-6044 Fax: (907)235-2644

E-mail: homerilp@xyz.net

#### **JUNEAU**

**REACH Infant Learning Program** 

Attn: Paula McMeen

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#### **HAINES**

**REACH Infant Learning Program** 

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#### **PETERSBURG**

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#### **KETCHIKAN**

Community Connections Infant Learning Program Attn: Laurie Thomas 2030 Sea Level Drive #350 Ketchikan, Alaska 99901

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#### **KODIAK**

KANA Kodiak Infant Learning Program

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#### **KOTZEBUE**

Northwest Arctic Borough School District (NWABSD) Infant Learning Program

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#### **NOME**

Norton Sound Health Corporation (NSHC)

Infant Learning Program

Attn: Rick Partridge or Kristen Penttila

PO Box 966

Nome, Alaska 99762 Phone: (907)443-3298 Fax: (907)443-3741

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#### **SEWARD**

SeaView Community Services

Attn: Monica Luther 302 Railway Ave. Suite #9

PO Box 1045

Seward, Alaska 99664 Phone: (907)224-5257 Fax: (907)224-8883 E-mail: ilp@seward.net

#### **SITKA**

Center for Community, Early Learning Program

Attn: Melanie Reif 700 Katlain Street, Suite B Sitka, Alaska 99835 Phone: (907)747-6960 Fax: (907)747-4868

E-mail: mreif@mail.cfc.org

#### **SOLDOTNA**

Frontier Community Services EI/ILP

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#### **WASILLA**

Mat-Su Services for Children & Adults

Infant Learning Program

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